

# CHECK-IN SHEET

NRL

NON-NRL

NRLINST 12290.1B

NAME (Last, First, MI)		SSN	DOB	CHECK-IN DATE
HOME ADDRESS				
POSITION/SERIES/GRADE		WORK SCHEDULE PT      FT      INT	HIRE INFORMATION TRANSFER NEW-HIRE	EFFECTIVE DATE
DIVISION	CODE	SUPERVISOR/SPONSOR/ADVISOR'S NAME		PHONE NUMBER
NEW HIRE ELIGIBLE FOR: HEALTH INSURANCE      LIFE INSURANCE YES      NO      YES      NO		TRANSFERS ONLY HEALTH ENROLLMENT CODE _____ WAIVED		RETIREMENT CODE
PLACES TO VISIT				INITIALS
SECURITY (BLDG. 72, LOBBY)  (CHESAPEAKE BAY DETACHMENT EMPLOYEES SHOULD REPORT TO THE CBD SECURITY OFFICE, BLDG. 6, RM. 102)				
ADMINISTRATIVE OFFICE  (NAME _____, BLDG. _____, RM. _____)				

**The Administrative Office should retain the upper portion and give the lower portion to the employee.**

1. New Employee Orientation (Date \_\_\_\_\_, 8 :30 a.m., Bldg. 222, Auditorium).
2. Patent Orientation (will be held immediately following New Employee Orientation).
3. Safety and Security Orientation (Date \_\_\_\_\_, 9 :00 a.m., Bldg 226, Auditorium).

## Payroll Office (Transfers Only)

Pensacola

Other

REMARKS